# 2011 Military Health System Conference Infections Complicating the Care of Combat Casualties during Operations Iraqi

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27 January 2011







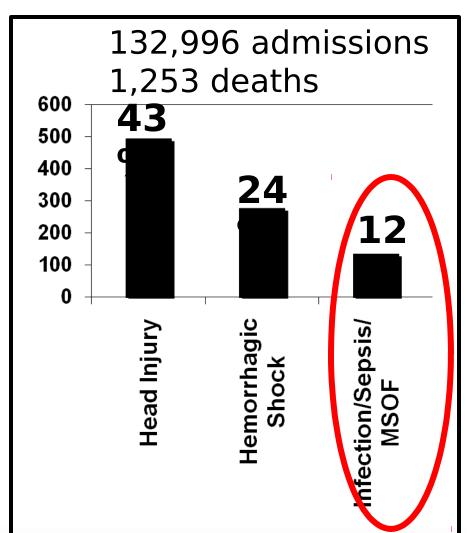
Brooke Army Medical Center Uniformed Services University of the Health Sciences

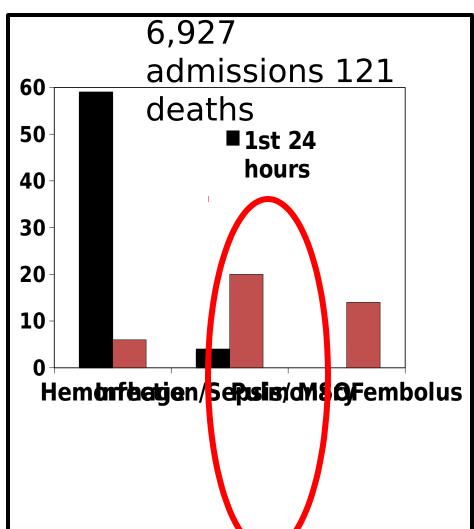
Infectious Diseases Clinical Research Program

US Army Institute of Surgical Research Data Coordinating and Analysis Center, US Military HIV Research Program

# Vietnam Combat Hospitals-Mortality







**Arnold. Military Medicine.** 

Feltis. American Journal of Surgery.

### **Infectious Complications**





Injured 8 April 2006

- Infections due to
  - Acinetobacter
  - Pseudomonas
  - Klebsiella
  - Staphylococc us aureus
- Complications
  - Kidney
  - Bone marrow



Retired 27 March 2010

**2011 MHS Conference** 

Pictures with

# Objective



 Assess infectious complications and their risk factors among combat casualties to mitigate excess morbidity and mortality



75% body surface area burn patient Ar Ramadi, Iraq

# Methodology



- Joint Theater Trauma Registry (JTTR)
  - Deployment-related injuries with completed records between 19 March 2003-13 April 2009

- ICD-9 codes for infections defined by

Anatomical/clinical syndrom

- Infecting pathogens
- Risk factors included
  - Mechanisms of injury
  - Injury severity
- 2011 MHS C. Transfusion

#### Results



- 16,742 patients
  - -15,021 from Iraq (90%)
  - 10,973 battle injuries (67%)- 36% explosions
  - -97% male, 78% enlisted, 78% Army
- Infections
  - -921 (6%) had one or more infections
  - Anatomical/clinical syndromesskin/wounds
  - Infecting pathogens- gram negative bacteria

#### Conclusions



- Casualties from Iraq and Afghanistan face substantial risk of infectious complications
- Improved diagnostic platforms and treatment modalities are needed from near the point of injury through longterm rehabilitative care
- Focus on standardized treatment guidelines and infection control and prevention strategies

#### Limitations



#### Issues

- ICD-9 code diagnosis
- Retrospective chart review
- Inadequate infectious disease specific granularity
- Inadequate long-term follow up
- Poor correlation of infection with bacterial
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#### Solution

- > JTTR ID module
- Trauma ID
  Outcome Study
  (TIDOS)
- Multidrug-resistant
   Organism
   Repository and
   Surveillance
   Network (MRSN)

# 2011 Military Health System Conference Infections Complicating the Care of Combat Casualties during Operations Iraqi Freedomina modife neturing virge ecom Edmund C. Tramont, MD, MACP



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# **Combat Related Infections**



- Recognized since the earliest recording of battlefield morbidities
- A dynamic and ever evolving threat
  - Establishment of improved body armor, well equipped ICUs, relatively rapid evacuation of wounded
  - Continued evolution of microbial resistance
    - NDM (New Delhi metallo-beta-lactamase)
- The uniqueness of the military medical care system and the requirement for US Military to advance the understanding of the ever changing dynamics of combat associated infections and lead the progress in improved care and treatment of combat related infections requires a longstanding commitment to a comprehensive focused research mission
  - Joint Theater Trauma System (JTTS) and Joint Theater Trauma Registry (JTTR)